



**CERTIFICATE OF MAILING
(PATENT APPLICATION)**

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Deposited: March 14, 2005

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By: _____

Application of: David Duncan

Application No.: 10/687,014

Filing Date: October 16, 2003

Title: TEXTURED WIRE TIE AND METHODS OF MAKING SAME

Transmitted herewith are the following documents:

☒ Transmittal Form PTO/SB/21 (In duplicate)

☒ Amendment And Response To Office Action Dated December 14, 2004 (10 pages)

☒ Return Receipt Postcard

Attorney Case No.: 06318.00001



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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/687,014	
	Filing Date	October 16, 2003	
	First Named Inventor	David Duncan	
	Art Unit	1775	
	Examiner Name	Jill M. Gray	
Total Number of Pages in This Submission		Attorney Docket Number	06318.00001

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Express Mail and Return Receipt Postcard				
<table border="1"><tr><td>Remarks</td><td>The Commissioner is hereby authorized to charge any additional fees or credit any overpayment of fees to Deposit Account No. 19-0733.</td></tr><tr><td colspan="2">EV378038660US</td></tr></table>			Remarks	The Commissioner is hereby authorized to charge any additional fees or credit any overpayment of fees to Deposit Account No. 19-0733.	EV378038660US	
Remarks	The Commissioner is hereby authorized to charge any additional fees or credit any overpayment of fees to Deposit Account No. 19-0733.					
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Wendell W. Harris (Reg. No. 55,881) Banner & Witcoff, Ltd.
Signature	
Date	March 14, 2005

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name			
Signature		Date	

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